PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

INSTRUCTIONS: This appropriate. All further indicated unless correct maintenance fee notifica	ed below or directed oth	for transmitting the ISS of the Patent, advance herwise in Block 1, by	SUE FEE and PUBLIC orders and notification (a) specifying a new co	ATION FEE (if req of maintenance fees orrespondence addres	uired). I will be s; and/o	Blocks 1 through 5 mailed to the curren r (b) indicating a sep	should be completed where t correspondence address as parate "FEE ADDRESS" for
CURRENT CORRESPOND	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.						
22145			e of Mailing or Tran	emission			
KLEIN, O'NEILL & SINGH, LLP 43 CORPORATE PARK SUITE 204 IRVINE, CA 92606				I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
IKVINE, CA 92	(Depositor's name) (Signature)						
							(Date)
APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR		ATTORNEY DOCKET NO. CONFIRMATION NO.		
10/552,217	1020-01-PCT-PA 6783						
TITLE OF INVENT HETEROGENEOUS SC	ION: SINGLE STEP DLID CATALYST	PROCESS FOR T	HE PREPARATION	OF LOWER AL.	РНА-АІ	LKENE POLYMEI	RIZATION
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE PREV. PAID ISS	JE FEE	TOTAL FEE(S) DU	E DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$0		10/05/2007
EXAMINER		ART UNIT	CLASS-SUBCLASS	SUBCLASS			
	CAIXIA	502-115000					
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			(1) the names of to agents OR, after (2) the name of a registered attorney 2 registered patent	rag on the patent front page, list es of up to 3 registered patent attorneys k, alternatively, e of a single firm (having as a member a torney or agent) and the names of up to patent attorneys or agents. If no name is me will be printed. Klein, O'Neill k Singh, LLP 2Howard J. Klein 3			
PLEASE NOTE: Un recordation as set for (A) NAME OF ASSI		ified below, no assigne pletion of this form is N	e data will appear on t OT a substitute for filing	he patent. If an assig g an assignment. CITY and STATE OR			document has been filed for
			•		Corporat	tion or other private g	roup entity Government
4a. The following fee(s) are submitted: ✓ Issue Fee ✓ Publication Fee (No small entity discount permitted) ✓ Advance Order - # of Copies ✓ Advance Order - # of Copies ✓ Order -							
a. Applicant clain	atus (from status indicate	us, See 37 CFR 1.27.		longer claiming SMA			
NOTE: The Issue Fee ar interest as shown by the	nd Publication Fee (if fee records of the United St	uired) will not be accep					the assignee or other party in
Authorized Signature	ful 4	7/_		Date	reg	2,2017	
Typed or printed name Howard J. Klein				Registration No. 28,727			
This collection of inform an application. Confider submitting the complete	nation is required by 37 Contiality is governed by 35 d application form to the	CFR 1.311. The informa 5 U.S.C. 122 and 37 CF 5 USPTO. Time will va	tion is required to obtain R 1.14. This collection in ry depending upon the	or retain a benefit by s estimated to take 12 individual case. Any	the pub minute commen	blic which is to file (are to complete, include its on the amount of the complete include its on the amount of the complete include its on the complete include its on the complete include include its on the complete include its on the complete include include its on the complete include include its on the complete include its on the complete include include its one include its on	nd by the USPTO to process) ing gathering, preparing, and ime you require to complete

Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.